

## THE LINCOLN GARDENS OWNERS CORP.

144-40, 144-44, 144-46, 144-50 38<sup>th</sup> Avenue,  
Flushing, NY 11354  
(718) 476-8377\*\*\*\*\* Fax (347)649-3971

### REQUIREMENTS FOR SALES

A complete package of the information required must be submitted to the Management Office. After review, all applicants will be notified by the Management Office of the date of interview with the Interview Committee of the Board of Directors of The Lincoln Gardens Owners Corp. All adult prospective shareholders and/or residents must appear before the Interview Committee. The following items are required in all application packages.

1. A complete application for the purchase of Co-operative Apartment form. (Available at Management Office).
2. A copy of the last two years Income Tax Returns of the Purchaser(s).
3. A letter of reference from the Purchaser(s)' current employer, stating the length of employment and approximate current salary, please include the last three pay stubs.
4. A letter from the purchaser(s)' landlord or managing agent stating current rent or maintenance payments history and tenant/shareholders background reference.
5. Two letters of personal references.
- ⑥ A copy of the signed contract of sale, showing a minimum 20% deposit on contract. No sale can be financed for more than 80% of the purchase price.
7. A check for \$250.00 for application fee, is payable to Lincoln Gardens Owners Corp. Another check for \$250.00 for Reserve Contribution is also payable by the Purchaser to Lincoln Gardens Owners Corp. at the closing.
8. A check for \$150.00 for Tribor Management Inc. for processing of the application fee.
9. Latest Bank Statement.
10. Commitment from the Bank.
11. A photocopy of the purchaser(s)'s IDs.

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- Completed forms submitted by: \_\_\_\_\_
  - Date of Scheduled Interview Meeting: \_\_\_\_\_
  - Tentative Date of Closing: \_\_\_\_\_

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**Purchase of Co-operative Apartment Application**

**Unit Information**

Apartment #: \_\_\_\_\_

Building Address: \_\_\_\_\_

Sales Price: \_\_\_\_\_  
(please attach copy of signed contract)

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Owner's Phone#: \_\_\_\_\_

Number of Shares: \_\_\_\_\_

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**BUYER'S INFORMATION**

Name(s) of Buyer: \_\_\_\_\_  
(as it will appear on the Stock Certificate)

If two or more people are purchasing apartment, please explain relationship: \_\_\_\_\_

\_\_\_\_\_

If children will live with you, what are their ages? \_\_\_\_\_

Do you have any pets?: \_\_\_\_\_ What kind?: \_\_\_\_\_

If each purchaser, please provide the following information:

Full name: \_\_\_\_\_

Current address: \_\_\_\_\_

Current Telephone number: \_\_\_\_\_

How long have you lived at the above address?: \_\_\_\_\_

What are your current rental or mortgage payments?

\_\_\_\_\_

Please provide the name, address and telephone number of your current landlord or Managing

Agent.: \_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT INFORMATION**- Please note, if more than two purchasers, please provide the information on a separate sheet.

**Purchaser#1:**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone#: \_\_\_\_\_

Your position: \_\_\_\_\_

Length of affiliation: \_\_\_\_\_

**Purchaser#2:**

Employers: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone#: \_\_\_\_\_

Your position: \_\_\_\_\_

Length of affiliation: \_\_\_\_\_

**FINANCIAL INFORMATION**

**Purchaser#1:**

Social Security#: \_\_\_\_\_

Salary: \_\_\_\_\_

Other Income: \_\_\_\_\_

Bank: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone#: \_\_\_\_\_

Checking Acct.#: \_\_\_\_\_

Savings Acct.#: \_\_\_\_\_

**Purchaser#2:**

Social Security#: \_\_\_\_\_

Salary: \_\_\_\_\_

Other Income: \_\_\_\_\_

Bank: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone#: \_\_\_\_\_

Checking Acct.#: \_\_\_\_\_

Savings Acct.#: \_\_\_\_\_

TOTAL COMBINED ANNUAL INCOME: \_\_\_\_\_

**MISCELLANEOUS INFORMATION**

What source was used to find this apartment?: \_\_\_\_\_

Name of source: \_\_\_\_\_

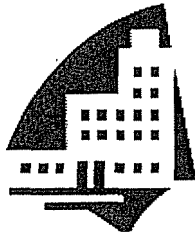
Do you own a car? Yes \_\_\_\_ No \_\_\_\_ If yes, would you like a garage space? Yes \_\_\_\_ No \_\_\_\_

IT IS UNDERSTOOD AND AGREED THAT THIS APPLICATION IS SUBJECT TO  
ACCEPTANCE OR REJECTION AT ANY TIME BY THE CORPORATION AT ITS  
DISCRETION.

Purchaser#1's Signature

Purchaser#2's Signature

Dated: \_\_\_\_\_



**TRIBOR  
MANAGEMENT  
INCORPORATED**

45-62 162<sup>nd</sup> Street ♦ Flushing ♦ NY ♦ 11358  
Tel (718) 476-8377 ♦ Fax (347) 649-3971

Property Code: \_\_\_\_\_  
Apt. # \_\_\_\_\_

**CREDIT CHECK AUTHORIZATION**

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

HOME ADDRESS (LAST SEVEN YEARS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

In Connection with my purchase / leasing of property, I authorize the procurement of a credit report on my self. I further authorize all credit agencies, banks, lending institutions and persons to release information they may have about me and release them from any liability and responsibility from doing so. This authorization, in original or copy form, shall be valid for this and any future reports that may be requested. Further information may be available upon request within reasonable period of time.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# TRIBOR MANAGEMENT, INC.

45-62 162<sup>nd</sup> Street, Flushing, NY 11358

(718) 476-8377 Phone

(347) 647- 3971 Fax

Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ S.S. #: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Past / Present Employment Information:

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Position: \_\_\_\_\_

Employment Dates:

From: \_\_\_\_\_ To: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
\*\*\*\*\*

- 1) It is understood that deposit is accepted subject to the Board's approval and acceptance; and reference, employment and credit verification.
- 2) The undersigned gives permission for Tribor Management, Inc. or its agent to check credit, references and employment information.
- 3) The credit check fee or application fee will NOT be refunded if applicant is not accepted.

I Hereby Authorize Tribor Management, Inc. to perform the above requested reports

X \_\_\_\_\_